

General

Title

Chronic graft versus host disease (cGVHD): percentage of patients diagnosed with cGVHD with diagnosis confirmed with at least one diagnostic manifestation or one distinctive manifestation with confirmation by pertinent biopsy, lab tests or radiology in the same or different organ.

Source(s)

Proposed chronic graft versus host disease measure set: questionnaire, measures with specifications, glossary. Arlington Heights (IL): American Society for Blood and Marrow Transplantation; 26 p.

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Process

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage of patients diagnosed with chronic graft versus host disease (cGVHD) with diagnosis confirmed with at least 1 diagnostic manifestation OR 1 distinctive manifestation with confirmation by pertinent biopsy, lab tests or radiology in the same or different organ.

Rationale

The pathogenesis of chronic graft versus host disease (cGVHD) is poorly understood. Symptoms usually present within 3 years after allogeneic hematopoietic cell transplantation (HCT) and are often preceded by a history of acute GVHD. Manifestations of chronic GVHD may be restricted to a single organ or tissue or may be widespread. Chronic GVHD can lead to debilitating consequences, e.g., joint contractures, loss of sight, end-stage lung disease, or mortality resulting from profound chronic immune suppression leading to recurrent or life-threatening infections.

Statement (verbatim) from National Institutes of Health (NIH) Consensus Development Project on gap: Reported incidence rates of chronic GVHD after allogeneic transplantation range from 6% to 80% according to recipient age, donor type, hematopoietic cell transplantation (HCT) source (peripheral blood, bone marrow, or umbilical cord blood stem cells), graft manipulation (T-cell depletion), and use of post transplantation donor lymphocyte infusions (DLIs). Reliable incidence estimates in different cohorts of HCT recipients are compromised by (1) lack of standardized, widely used diagnostic guidelines; (2) variability in observer experience; (3) limited expert follow-up at a distance from transplant centers; (4) differences in the statistical methods applied (e.g., use of the Kaplan-Meier versus cumulative incidence estimates and variable requirement for some minimal survival [60-100 days] for patients to be considered at risk of chronic GVHD); and (5) the sometimes protean nature of early chronic GVHD symptoms, which mimic alternative diagnoses.

Evidence for Rationale

Filipovich AH, Weisdorf D, Pavletic S, Socie G, Wingard JR, Lee SJ, Martin P, Chien J, Przepiorka D, Couriel D, Cowen EW, Dinndorf P, Farrell A, Hartzman R, Henslee-Downey J, Jacobsohn D, McDonald G, Mittleman B, Rizzo JD, Robinson M, Schubert M, Schultz K, Shulman H, Turner M, Vogelsang G, Flowers ME. National Institutes of Health consensus development project on criteria for clinical trials in chronic graft-versus-host disease: I. Diagnosis and staging working group report. Biol Blood Marrow Transplant. 2005 Dec;11(12):945-56. PubMed

Proposed chronic graft versus host disease measure set: questionnaire, measures with specifications, glossary. Arlington Heights (IL): American Society for Blood and Marrow Transplantation; 26 p.

Remberger M, Aschan J, Lonnqvist B, Carlens S, Gustafsson B, Hentschke P, Klaesson S, Mattsson J, Ljungman P, Ringden O. An ethnic role for chronic, but not acute, graft-versus-host disease after HLA-identical sibling stem cell transplantation. Eur J Haematol. 2001 Jan;66(1):50-6. PubMed

Rocha V, Wagner JE Jr, Sobocinski KA, Klein JP, Zhang MJ, Horowitz MM, Gluckman E. Graft-versus-host disease in children who have received a cord-blood or bone marrow transplant from an HLA-identical sibling. Eurocord and International Bone Marrow Transplant Registry Working Committee on Alternative Donor and Stem Cell Sources. N Engl J Med. 2000 Jun 22;342(25):1846-54. PubMed

Sullivan KM, Agura E, Anasetti C, Appelbaum F, Badger C, Bearman S, Erickson K, Flowers M, Hansen J, Loughran T, et al. Chronic graft-versus-host disease and other late complications of bone marrow transplantation. Semin Hematol. 1991 Jul;28(3):250-9. [75 references] PubMed

Sullivan KM. Graft vs. host disease. In: Blume KG, Forman SJ, Appelbaum FR, editor(s). Thomas' Hematopoietic Cell Transplantation. 3rd ed. Malden (MA): Blackwell Publishing; 2004. p. 635-64.

Primary Health Components

Chronic graft versus host disease (cGVHD); diagnostic or distinctive manifestation; confirmatory tests

Denominator Description

The number of patients in your selection diagnosed with chronic graft versus host disease (cGVHD) (see the related "Denominator Inclusions/Exclusions" field)

Numerator Description

The number of patients in your selection diagnosed with chronic graft versus host disease (cGVHD) AND

greater than or equal to 1 diagnostic manifestation documented in the medical record OR greater than or equal to 1 distinctive manifestation documented in the medical record AND the diagnosis confirmed by pertinent biopsy, laboratory tests, or radiology in the same or another organ (see the related "Numerator Inclusions/Exclusions" field)

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

The Chronic Graft Versus Host Disease (cGVHD) measure set was developed by the American Society for Blood and Marrow Transplantation (ASBMT) using a rigorous methodology (adapted from the American Medical Association's Physician Consortium for Performance Improvement [AMA-PCPI] and including field testing) and adapted for use in Practice Improvement Modules (PIMs) by the American Board of Internal Medicine (ABIM).

Evidence for Extent of Measure Testing

Joseph TL. (Executive Director, American Society for Blood and Marrow Transplantation). Personal communication. 2013 Jan 21. 1 p.

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Hospital Inpatient Hospital Outpatient
Professionals Involved in Delivery of Health Services not defined yet
Least Aggregated Level of Services Delivery Addressed Clinical Practice or Public Health Sites
Statement of Acceptable Minimum Sample Size Specified
Target Population Age All ages
Target Population Gender Either male or female
National Strategy for Quality Improvement in Health Care
National Quality Strategy Aim Better Care
National Quality Strategy Priority Prevention and Treatment of Leading Causes of Mortality
Institute of Medicine (IOM) National Health Care Quality Report Categories
IOM Care Need Living with Illness
IOM Domain

Ambulatory/Office-based Care

Data Collection for the Measure

Case Finding Period

12 months

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Clinical Condition

Encounter

Therapeutic Intervention

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

The number of patients in your selection diagnosed with chronic graft versus host disease (cGVHD)

Note: Patients can be included in the chart abstraction if:

They have been seen by the practice within the past 12 months; and Management decisions regarding care are made primarily by providers in the practice.

Select at least 10 of your patients who have had hematopoietic cell transplant (HCT) and cGVHD. Refer to the original measure documentation for administrative codes.

Exclusions

Initial diagnosis made at another facility or institution

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

The number of patients in your selection diagnosed with chronic graft versus host disease (cGVHD) AND greater than or equal to 1 diagnostic manifestation documented in the medical record OR greater than or equal to 1 distinctive manifestation documented in the medical record AND the diagnosis confirmed by pertinent biopsy, laboratory tests, or radiology in the same or another organ

Note:

This requires documentation in the patient's medical record of at least 1 diagnostic manifestation of cGVHD or at least 1 distinctive manifestation confirmed by pertinent biopsy, laboratory tests, or radiology in the same or another organ prior to cGVHD diagnosis. (See original measure documentation for details).

Diagnostic signs and symptoms refer to those manifestations that establish the presence of chronic GVHD without the need for further testing or evidence of other organ involvement.

Distinctive signs and symptoms of chronic GVHD refer to those manifestations that are not ordinarily found in acute GVHD but are not considered sufficient to establish an unequivocal diagnosis of chronic GVHD without further testing or additional organ involvement.

Exclusions

None

Numerator Search Strategy

Fixed time period or point in time

Data Source

Administrative clinical data

Paper medical record

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Identifying Information

Original Title

Patients diagnosed with cGVHD with diagnosis confirmed with at least 1 diagnostic manifestation OR 1 distinctive manifestation with confirmation by pertinent biopsy, lab tests or radiology in the same or different organ.

Measure Collection Name

Chronic Graft Versus Host Disease Measure Set

Submitter

American Society for Blood and Marrow Transplantation - Professional Association

Developer

American Society for Blood and Marrow Transplantation - Professional Association

Funding Source(s)

American Society for Blood and Marrow Transplantation

Composition of the Group that Developed the Measure

The American Society for Blood and Marrow Transplantation (ASBMT) Education Practice Improvement Modules Task Force:

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Financial Disclosures/Other Potential Conflicts of Interest

Conflicts, if any, are disclosed in accordance with the American Society for Blood and Marrow Transplantation (ASBMT) conflict of interest policy.

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

Measure Maintenance

Unspecified

Date of Next Anticipated Revision

Unspecified

Measure Status

This is the current release of the measure.

The measure developer reaffirmed the currency of this measure in February 2017.

Measure Availability

Source not available electronically.

For more information, contact the American Society for Blood and Marrow Transplantation (ASBMT) at 85 W. Algonquin Road, Suite 550, Arlington Heights, IL 60005; Phone: 847-427-0224; Fax: 847-427-9656; Web site: www.asbmt.org ; E-mail: mail@asbmt.org.

NQMC Status

This NQMC summary was completed by ECRI Institute on September 24, 2013. The information was verified by the measure developer on October 25, 2013.

The information was reaffirmed by the measure developer on February 8, 2017.

Copyright Statement

This NQMC summary is based on the original measure, which is subject to the measure developer's copyright restrictions.

Production

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